UNITED STATES COURT OF APPEALS FOR THE NINTH CIRCUIT

Form 4. Motion and Affidavit for Permission to Proceed in Forma Pauperis

Instructions for this form: http://www.ca9.uscourts.gov/forms/form04instructions.pdf

9th Cir. Case Number(s) unassigned

Case Name blount v contra costa et al

Affidavit in support of motion: I swear under penalty of perjury that I am financially unable to pay the docket and filing fees for my appeal. I believe my appeal has merit. I swear under penalty of perjury under United States laws that my answers on this form are true and correct. 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Signature	Date 4/10/25
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The court may grant a motion to proceed in forma pauperis if you show that you cannot pay the filing fees **and** you have a non-frivolous legal issue on appeal. Please state your issues on appeal. (attach additional pages if necessary)

Appellant acknowledges that federal courts lack jurisdiction to review or reverse final state court judgments under the Rooker-Feldman doctrine. However, Appellant does not seek to overturn any custody or visitation determinations made by the Contra Costa County Family Court.

Instead, Appellant challenges systemic procedural violations that occurred within the state court proceedings, including the failure to issue necessary written orders, the refusal to accept contempt filings, and the continued enforcement of an expired restraining order. These actions, taken collectively, deprived Appellant of her fundamental rights to access the courts and to due process, in violation of the First and Fourteenth Amendments to the United States Constitution.

The claims presented are therefore independent constitutional challenges to the procedures employed by the state court system, and not de facto appeals of any specific judgment. Such claims are properly within the jurisdiction of the federal courts, as recognized by this Court in Kougasian v. TMSL, Inc., 359 F.3d 1136 (9th Cir. 2004), and Noel v. Hall, 341 F.3d 1148 (9th Cir. 2003).

Accordingly, Rooker-Feldman does not apply, and the District Court's dismissal should be reversed.

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Form 4 1 Rev. 12/01/2018

1. For both you and your spouse, estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

		y amount during 12 months	Amount expected next month			
Income Source	You	Spouse	You	Spouse		
Employment	\$ 700	\$ 0	\$ 0	\$ 0		
Self-Employment	\$ 0	\$ 0	\$ 0	\$ 0		
Income from real property (such as rental income)	\$ 0	\$ 0	\$ 0	\$ 0		
Interest and Dividends	\$ 0	\$ 0	\$ 0	\$ 0		
Gifts	\$ 0	\$ 0	\$ 0	\$ 0		
Alimony	\$ 0	\$ 0	\$ 0	\$ 0		
Child Support	\$ 0	\$ 0	\$ 0	\$ 0		
Retirement (such as social security, pensions, annuities, insurance)	\$ 0	\$ 0	\$ 0	\$ 0		
Disability (such as social security, insurance payments)	\$ 0	\$ 0	\$ 0	\$ 0		
Unemployment Payments	\$ 0	\$ 0	\$ 0	\$ 0		
Public-Assistance (such as welfare)	\$ 0	\$ 0	\$ 0	\$ 0		
Other (specify)	\$ 0	\$ 0	\$ 0	\$ 0		
FOTAL MONTHLY INCOME:	\$ 700	\$ 0	\$ 0	\$ 0		

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2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross Monthly Pay
edelweiss lodge and resort	garmisch partenkirchen germany	From 11/24 To 4/24	\$ [1200
the hampton social	nashville tn	From 03/24 To 11/24	\$ 2000
paula le duc catering	san francisco ca	From 01/23 To 11/23	\$ 800
		From To	- \$

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of Employment	Gross Monthly Pay
		From To	\$
		From To	\$
		From To	\$
		From To	\$

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Financial Institution		Type of Account		Amount You Have		Amount Your Spouse Has		
pank of america	check	ing	\$	0	\$	0		
			\$		\$			
			\$		\$			
			\$		\$			
ou have been in multiple i	nstitutio	ns, attach one certifi	ied sta	itement of each accor	int.			
List the assets, and their wousehold furnishing.		hich you own or you		use owns. Do not list o				
List the assets, and their vousehold furnishing. Home						ing and ordinary Value		
List the assets, and their vousehold furnishing. Home		hich you own or you		use owns. Do not list o				
ou have been in multiple i List the assets, and their to ousehold furnishing. Home	values, w	hich you own or you		use owns. Do not list o	cloth			
List the assets, and their vousehold furnishing. Home	s [hich you own or you		use owns. Do not list o	cloth			
List the assets, and their vousehold furnishing. Home one	s [hich you own or you Value		ose owns. Do not list o	cloth	Value		
List the assets, and their vousehold furnishing. Home one Motor Vehicle 1: Make &	\$ Year	hich you own or you Value		ose owns. Do not list o	\$	Value		

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Other Asset	s	Value
none		\$
		\$
		\$
6. State every person, business, or organizatio	n owing you or your spouse money	, and the amount owed.
Person owing you or your spouse	Amount owed to you	Amount owed to your spouse
none	\$	

Person owing you or your spouse	Amount owed to you	A	Amount owed to your spouse
none	\$	\$	
Ž'	\$	\$	
	\$	\$	

7. State the persons who rely on you or your spouse for support. If a dependent is a minor, list only the initials and not the full name.

Na	Name	Relationship	Age

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8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

	You	Spouse
Rent or home-mortgage payment (include lot rented for mobile home)	\$ 1500	\$
- Are real estate taxes included? Yes No		
- Is property insurance included? CYes No		
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$ 100	\$
Home maintenance (repairs and upkeep)	\$ 0	\$
Food	\$ 300	\$
Clothing	\$ 100	\$
Laundry and dry-cleaning	\$ 100	\$
Medical and dental expenses	\$ 100	\$
Transportation (not including motor vehicle payments)	\$ 75	\$
Recreation, entertainment, newspapers, magazines, etc.	\$ 50	\$
Insurance (not deducted from wages or included in mortgage payments)		
- Homeowner's or renter's	\$	\$
- Life	\$	\$
- Health	\$ 50	\$
- Motor Vehicle	\$ 6	\$
- Other	\$ 0	\$
Taxes (not deducted from wages or included in mortgage payments)		
Specify	\$ 0	\$

	You	Spouse		
Installment payments				
- Motor Vehicle	\$ 0	\$		
- Credit Card (name)	\$ 0	\$		
- Department Store (name)	\$ 100	\$		
Alimony, maintenance, and support paid to others	\$ 0	\$		
Regular expenses for the operation of business, profession, or farm (attach detailed statement)	\$ 0	\$		
Other (specify)	\$ 0	\$		
TOTAL MONTHLY EXPENSES	\$	\$		
If Yes, describe on an attached sheet. 10. Have you spent—or will you be spending—any money for expenses or lawsuit? O Yes • No If Yes, how much? \$	ay the docket fees for the docket fees for the complete do complete do country. The results in the country is t	or your appeal.		
12. State the city and state of your legal residence. City santa barbara State ca				
Your daytime phone number (ex., 415-355-8000) 510-295-3224				
Your age 35 Your years of schooling 12				

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